<u>EDITORIAL NOTE</u>: This module was part of a questionnaire associated with a melanoma study. If you are studying a different cancer, you may want to skip or alter H8-H10, H27-H29.

SECTION H. FAMILY HISTORY

or

Now I have a few questions about the health of some of your <u>blood</u> relatives. I am only interested in your relatives who are related by blood. Do not include adopted or foster relatives. I will be asking about your mother, your father, any sisters and brothers you have, and any children.

H1.	First, are you adopted?			
		YES		(H3)
H2.	Can you answer questions about the health sisters?	of your <u>blood</u> relatives, that is your birth-parents	or	any brothers
		YES	1	(H21)
H3.	Are you a twin (or triplet)?			
		YES		(H5)
H4.	Are you an identical or fraternal twin (or triplet)?		
		IDENTICALFRATERNAL	1 2	
Now I wi	ill ask a few questions about the health of your	blood relatives. Let's start with your mother.		
	(ASK H5-H16 FOR EACH RELATIVE	. .)		

	H5.	H6.	H7.	H8.	H9.	H10.
			How old (is			
			your RELATIVE			
			now/was your	Did your		How old was
	ls your	Is what year	RELATIVE	RELATIVE		(he / she)
	RELATIVE	did (he / she)	when he / she	ever have skin	Was it a	when it was
	alive now?	die?	died?	cancer?	melanoma?	diagnosed?
a. Mother	YES1(H7a) NO 2	_ YEAR	_ AGE	YES1 NO 2 (H11a)	YES 1 NO 2	_ AGE
b. Father	YES1(H7b) NO 2	_ YEAR	<u>_</u> _ AGE	YES1 NO . 2 (H11b)	YES 1 NO 2	 AGE

H11.	H12.	H13.	H14.	H15.	H16.

							•
Did y RELA ever ha other co	TIVE ave any ancer?	Where did the cancer start? (What type of cancer did (he / she) have?)	How old was (he / she) when it was diagnosed?	Did your RELATIVE ever have any other cancer?	Where did the cancer start? (What type of cancer did (he / she) have?)	How old was (he / she) when it was diagnosed?	
NO 2			 AGE	NO 2 (H5b)		 AGE	
YES ²			_ _ AGE	YES1 NO . 2 (H17)		_ AGE	
Again, I	would lik	e to remind you th	at I am only intere	sted in your <u>blood</u>	relatives.		
H17.	How ma		ou have, both living	g and deceased?	(IF ANY, ENTER "	FULL SISTER" FO	OR EACH ONE
	IIN FIZ3	.)		<u> </u>			
H18.	How ma		you have, both livir	ng and deceased?	(IF ANY, ENTER '	'HALF SISTER" FO	OR EACH ONE
	1141120	,,		_ HALF SISTERS			
H19. How many full brothers do you have, both living and deceased? (IF ANY, ENTER "FULL BROTHER" FOR EACH ONE IN H23.)							R" FOR EACH
_ FULL BROTHERS							
H20. How many half brothers do you have, both living and deceased? (IF ANY, ENTER "HALF BROTHER" FOR EACH ONE IN H23.)							R" FOR EACH
UNE IN FIZS.) HALF BROTHERS							
H21.	Now I would like to ask about your children. How many daughters do you have? Be sure to include any who have died. (IF ANY, ENTER "DAUGHTER" FOR EACH ONE IN H23.)						
_ DAUGHTERS							
H22.	How many sons do you have? Be sure to include any who have died. (IF ANY, ENTER "SON" FOR EACH ONE IN H23.)						

|__|_| SONS

(IF ANY ENTRIES IN H23, ASK H24-H35 FOR EACH ONE. PROBE FOR FIRST NAME OF EACH RELATIVE.)

H23.	H24.	H25.	H26.	H27.	H28.	H29.
RELATIONSHIP	Is your RELATIVE alive now?	In what year did (he / she) die?	How old (is your RELATIVE now/was your RELATIVE when he / she died)?	Did your RELATIVE ever have skin cancer?	Was it a melanoma?	How old was (he / she) when it was diagnosed?
a	YES1(H26a)	_ _	_	YES1	YES 1	_
	NO 2	YEAR	AGE	NO 2 (H30a)	NO 2	AGE
b	YES1 (H26b)	_ _	_	YES1	YES 1	_
	NO 2	YEAR	AGE	NO 2 (H30b)	NO 2	AGE
c.	YES1 (H26c)	_ _	_	YES1	YES 1	_
	NO 2	YEAR	AGE	NO 2 (H30c)	NO 2	AGE
d	YES1 (H26d)	_ _	_ _	YES1	YES 1	_
	NO 2	YEAR	AGE	NO 2 (H30d)	NO 2	AGE
e.	YES1 (H26e)	_ _	_	YES1	YES 1	_
	NO 2	YEAR	AGE	NO 2 (H30e)	NO 2	AGE
f	YES1 (H26f)	_ _	_ _	YES1	YES 1	_
	NO 2	YEAR	AGE	NO 2 (H30f)	NO 2	AGE
g	YES1 (H26g)	_ _	_	YES1	YES 1	_
	NO 2	YEAR	AGE	NO 2 (H30g)	NO 2	AGE
h	YES1 (H26h)	_ _	_	YES1	YES 1	_
	NO 2	YEAR	AGE	NO 2 (H30h)	NO 2	AGE
i.	YES1 (H26i)	_ _	_	YES1	YES 1	_
	NO 2	YEAR	AGE	NO 2 (H30i)	NO 2	AGE

H30.	H31.	H32.	H33.	H34.	H35.
Did your RELATIVE ever any other cancer?	Where did the cancer start? (What type of cancer did (he / she) have?)	How old was (he / she) when it was diagnosed?	Did your RELATIVE ever any other cancer?	Where did the cancer start? (What type of cancer did (he / she) have?)	How old was (he / she) when it was diagnosed?
YES1 NO 2 (H24b)		_ AGE	YES1 NO 2 (H24b)		_ AGE
YES1 NO 2 (H24c)		<u>_</u> _ AGE	YES1 NO 2 (H24c)		_ AGE
YES1 NO 2 (H24d)		_ AGE	YES1 NO 2 (H24d)		_ AGE
YES1 NO 2 (H24e)		_ AGE	YES1 NO 2 (H24e)		_ AGE
YES1 NO 2 (H24f)		_ AGE	YES1 NO 2 (H24f)		_ AGE
YES1 NO 2 (H24g)		_ AGE	YES1 NO 2 (H24g)		_ AGE
YES1 NO 2 (H24h)		_ AGE	YES1 NO 2 (H24h)		_ AGE
YES1 NO 2 (H24i)		_ AGE	YES1 NO 2 (H24i)		_ AGE
YES1 NO 2 (NEXT SECTION)		_ AGE	YES1 NO 2 (NEXT SECTION)		_ AGE